



## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Number:: 10/694,014  
Application Date:: 10/28/03  
Application Type:: REGULAR  
Subject Matter:: UTILITY  
CD-ROM or CD-R?:: NONE  
Title:: HOUSING FOR ELECTRONIC DEVICE  
WEARABLE ON USER'S FINGER  
Attorney Docket Number:: 244707US17  
Total Drawing Sheets:: 13

### INVENTOR INFORMATION

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Kai  
Family Name:: Marcucelli  
City of Residence:: Littleton  
State or Province of Residence:: Massachusetts  
Country of Residence:: United States  
Street of Mailing Address:: c/o Fila U.S.A., Inc.  
Corporate Headquarters, 1 Fila Way  
City of Mailing Address:: Sparks  
State or Province of Mailing Address:: Maryland  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 21152

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Craig  
Family Name:: Wojcieszak  
City of Residence:: Lee  
State or Province of Residence:: New Hampshire  
Country of Residence:: United States  
Street of Mailing Address:: c/o Fila U.S.A., Inc  
Corporate Headquarters, 1 Fila Way  
City of Mailing Address:: Sparks  
State or Province of Mailing Address:: Maryland  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 21152

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Edward  
Middle Name:: C.  
Family Name:: Frederick  
City of Residence:: Brentwood  
State or Province of Residence:: New Hampshire  
Country of Residence:: United States  
Street of Mailing Address:: c/o Fila U.S.A., Inc.  
Corporate Headquarters, 1 Fila Way  
City of Mailing Address:: Sparks  
State or Province of Mailing Address:: Maryland  
Country of Mailing Address:: United States  
Postal or Zip Code of Mailing Address:: 21152

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 22850

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 22850

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	119(e) of	60/456,549	03/24/03

#### ASSIGNMENT INFORMATION

Assignee Name:: Fila Luxembourg S.A.R.L.  
 Street of Mailing Address:: 46/A Avenue J. F. Kennedy  
 City of Mailing Address:: Luxembourg  
 Country of Mailing Address:: Luxembourg  
 Postal or Zip Code of Mailing Address:: L-1855